



August 6, 2013

WASHINGTON COUNTY
PIONEER CLOTHING CARE
DMWM/SEDO
OH0000107656

Mr. Paul Lambert
Pioneer Clothing Care
1211 Washington Blvd.
Belpre, Ohio 45714

Dear Mr. Lambert:

On July 24, 2013, Ohio EPA inspected Pioneer Clothing Care ("Pioneer") in Belpre, Ohio. The purpose of the inspection was to determine compliance with Ohio's hazardous waste laws as found in Chapter 3734 of the Ohio Revised Code (ORC) and Chapter 3745 of the Ohio Administrative Code (OAC). This letter will explain violations I found, what you need to do to respond to the violations, and my requests for additional information.

I found the following violations of Ohio's hazardous waste laws:

- OAC Rule 3745-66-71, Conditions of Containers:** If a container holding hazardous waste is not in good condition, the owner or operator must transfer the waste into a container in good condition or manage the waste in another manner that complies with this rule.

Pioneer was accumulating hazardous waste in a storage shed in a 15-gallon plastic drum that had a cracked lid. Pioneer has submitted a photograph indicating that the lid of this drum has now been replaced; therefore, this violation has been abated.

Pioneer has now abated all violations discovered during the July 24, 2013 inspection.

Enclosed, you will find a copy of the checklists that were completed as a result of the inspection. You can find copies of the rules and other information on the division's web page at <http://www.epa.state.oh.us/dhwm>. If you have any questions, please contact me by telephone at (740) 380-5293 or by e-mail at donna.goodman@epa.state.oh.us.

Sincerely,

Donna Goodman
Inspector
Division of Materials and Waste Management

Enclosure

DG/mr

NOTICE:

Ohio EPA's failure to list specific deficiencies or violations in this letter does not relieve your company from having to comply with all applicable regulations.

Send to Central Office <input type="checkbox"/>	Ohio Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION/VERIFICATION FORM	For Ohio EPA use only
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Completed verification forms required to be submitted to CO should be e-mailed to RCRAInfoData@epa.ohio.gov

Site EPA ID No. Site Name	EPA ID Number: OH0000107656		Website: (Optional)						
	Name: Pioneer Clothing Care								
Site Location Information	Street Address: 1211 Washington Blvd								
	City, Town, or Village: Belpre		State: OH						
	County Name: WASHINGTON		Zip Code: 45714						
Site Land Type (check only one) NAICS code(s) www.census.gov/epcd/www/naics.html	Private <input checked="" type="checkbox"/>	County <input type="checkbox"/>	District <input type="checkbox"/>	Federal <input type="checkbox"/>	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>	
	812320								

Facility Representative Additional names can be recorded in number 12 Only provide address information if it is different than the site address	First Name: Paul		MI:	Last Name: Lambert	
	Title: Owner/Operator				
	Phone Number:			Phone Number Extension:	
	E-Mail Address:				
	Fax Number:			Fax Number Extension:	
	Street or P.O. Box: 1211 Washington Blvd				
	City, Town or Village: Belpre		State: OH		

Legal Owner And Operator of the Site. List Additional Owners and/or Operators in the Comment Section or on another copy of this form page	Name of Site's Legal Owner:				Date Became Owner (mm/dd/yyyy):				
	Owner Type:	Private <input checked="" type="checkbox"/>	County <input type="checkbox"/>	District <input type="checkbox"/>	Federal <input type="checkbox"/>	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>
	Street or P.O. Box:								
	City, Town or Village:				Owner Phone #:				
	State:				Country:		Zip Code:		
	Name of Site's Operator:				Date Became Operator (mm/dd/yyyy):				
	Operator Type:	Private <input checked="" type="checkbox"/>	County <input type="checkbox"/>	District <input type="checkbox"/>	Federal <input type="checkbox"/>	Indian <input type="checkbox"/>	Municipal <input type="checkbox"/>	State <input type="checkbox"/>	Other <input type="checkbox"/>
Street or P.O. Box:									
City, Town or Village:				Operator Phone #:					
State:				Country:		Zip Code:			

VIOLATIONS CITED?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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TYPE OF HANDLER - MARK "X" AS APPROPRIATE

<input type="checkbox"/> Not a HW Generator	<input type="checkbox"/> UNKNOWN: Cited for violation of 3745-52-11	<input type="checkbox"/> Large Quantity Generator (LQG)
	<input type="checkbox"/> Short-Term/Temporary Generator (generates from a short-term or one-time event and not from on-going processes). Check the box for the applicable generator status and provide a comment.	<input checked="" type="checkbox"/> Small Quantity Generator (SQG)
		<input type="checkbox"/> Conditionally Exempt Small Quantity Generator
		<input type="checkbox"/> U.S. Importer of Hazardous Waste
		<input type="checkbox"/> Mixed Waste (Hazardous and Radioactive) Generator

TYPE OF REGULATED WASTE ACTIVITY (MARK "X" IN ALL OF THE APPROPRIATE BOXES)

- | | |
|---|--|
| <input type="checkbox"/> Hazardous Waste Transporter | <input type="checkbox"/> Exempt Boiler and/or Industrial Furnace |
| <input type="checkbox"/> Hazardous Waste Transfer Facility | <input type="checkbox"/> Small Quantity On-Site Burner Exemption |
| <input type="checkbox"/> Treater, Storer or Disposer of Hazardous Waste | <input type="checkbox"/> Smelting, Melting, Refining Furnace Exemption |
| <input type="checkbox"/> Recycler of Hazardous Waste | <input type="checkbox"/> Underground Injection Control Facility |
| <input type="checkbox"/> 72-Hour Recycler | <input type="checkbox"/> Receives Hazardous Waste from Off-site |

UNIVERSAL WASTE ACTIVITIES (INDICATE TYPES OF UNIVERSAL WASTE MANAGED

(CHECK ALL BOXES THAT APPLY)

- | | |
|---|---|
| <input type="checkbox"/> Small Quantity Handler of Universal Waste | <input type="checkbox"/> Destination Facility for Universal Waste |
| <input type="checkbox"/> Large Quantity Handler of Universal Waste
(accumulates 5,000 kg. or more) | |

CHECK ALL BOXES BELOW THAT APPLY FOR THE TYPES OF UNIVERSAL WASTE THE FACILITY MANAGES

- Batteries
- Pesticides
- Mercury containing equipment
- Lamps

USED OIL ACTIVITIES (INDICATE TYPE(S) OF ACTIVITY(S))

- Used Oil Generator
- Used Oil Transporter
- Used Oil Transfer Facility
- Used Oil Processor
- Used Oil Re-refiner
- Off-Specification Used Oil Burner
- Used Oil Fuel Marketer who directs shipment of Off-Spec Used Oil
- Used Oil Fuel Marketer who first claims the Used Oil meets the specifications

Eligible Academic Entities with Laboratories: Facility has previously notified that they are opting into managing laboratory hazardous waste pursuant to OAC rules 3745-52-200 through 3745-52-216. Check the box(es) below to indicate the laboratory type.

- College or University
- Teaching hospital that is owned by or has a formal written affiliation agreement with a college or university
- Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university

Waste Codes for Federally Regulated Hazardous Wastes. Please list the codes for the federally regulated hazardous waste handled at the site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page or list them in the comments if more space is needed. If the waste codes are the same as listed in the most recent RCRAInfo source record, you do not need to list them. Instead just indicate the date of the most recent source record.

D007 D039 D040 F002

COMMENTS: USE THIS AREA TO DESCRIBE WHETHER THE INSPECTION WAS ANNOUNCED, WHETHER THE WASTE IS STORED IN TANKS OR CONTAINERS, ETC.

Announced Yes No Additional Facility Representatives:
 Tanks Yes No
 Containers Yes No

Name of Inspector(s)
Donna Goodman

Name of Inspector(s)

Date of Inspection/Time
 (mm/dd/yyyy) (hh:mm)
7/24/2013

Comments:

Business is for sale by owner.

PROCESS, WASTE, P2 SUMMARY SHEET

Facility Name: Pioneer Clothing Care **Facility Type:** SQG **Date of Inspection:** 7/24/2013 **EPA ID#:** OH0000107656

Waste Generated			On- or Off-Site Management		P2 Activities	
Process/Activity Generating Waste (e.g. plating bath, machining, baghouse, painting, general maintenance, etc)	Waste Description (e.g. sludge, solvent, ash, used oil, spent lamps, etc.) and EPA Waste Code, if applic.	QTY Generated per Month, Type of Accumulation (container, tank, etc) and location of waste accumulation area	Type of On-Site Treatment (recycle, wwt, etc)	Name, state, and type of activity occurring at the off-site facility.	Current P2 Activities	P2 Opportunities
1 Dry Cleaning	Spent Solvent mixed with small volumes of separator water and muck F002/D007/ D029/D039/ D040	150-200 lb/mo		Safety Kleen Cranston, RI		
2 Dry Cleaning	Spent filters F002/D007/ D029/D039/ D040	25 lb/mo		Safety Kleen Cranston, RI		

REMARKS/GENERAL INFORMATION

General Process Information:

Pioneer Clothing Care uses two dry-to-dry machines to conduct dry cleaning operations. Spent solvent, filters, separator water and muck are contained in a small shed in the parking lot. The business has been for sale for the past year.

Regulatory/Enforcement History (if applicable):

Last inspected on 12/16/2009.

Additional P2 remarks and information:

NA

Would this facility be interested in a P2 assessment? Yes* No *If yes, refer promptly to your district P2 coordinator.

Office of Compliance Assistance and Pollution Prevention - 1-800-329-7518 or p2mail@epa.state.oh.us or www.epa.state.oh.us/ocapp/ocapp.html

Other:

NA

**SMALL QUANTITY GENERATOR REQUIREMENTS
COMPLETE AND ATTACH A PROCESS, WASTE, P2 SUMMARY SHEET**

CESQG: ≤100Kg. (Approximately 25-30 gallons) of waste in a calendar month or < 1 Kg. of acutely hazardous waste.
 SQG: Between 100 and 1,000 Kg. (About 25 to under 300 gallons) of waste in a calendar month.
 LQG: ≥ 1,000 Kg. (~300 gallons) of waste in a calendar month or ≥1 Kg. of acutely hazardous waste in a calendar month.
 NOTE: To convert from gallons to pounds: Amount in gallons x Specific Gravity x 8.345 = Amounts in pounds.

Safety Equipment Used:

GENERAL REQUIREMENTS

1.	Have all wastes generated at the facility been adequately evaluated? [3745-52-11]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
2.	Has the generator obtained a U.S. EPA I.D. number? [3745-52-12]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
3.	Has the generator transported or caused to be transported hazardous waste to other than a facility authorized to manage the hazardous waste? [ORC 3734.02 (F)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
4.	Has the generator disposed of hazardous waste on-site without a permit or at another facility other than a facility authorized to dispose of hazardous waste? [ORC 3734.02 (E) & (F)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
5.	Does the generator accumulate hazardous waste?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: If the SQG does not accumulate or treat hazardous waste, it is not subject to 52-34 standards. All other requirements might still apply, e.g. manifest, marking, LDR, etc.

6.	Has the generator accumulated hazardous wastes in excess of (180/270) days without a permit or an extension from the Director? [3745-52-34; ORC §3734-02(E)&(F)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: SQG's shipping waste to a facility greater than 200 miles away can accumulate on-site for 270 days. [3745-52-34 (E)]

7.	Is the generator accumulating more than 6,000 kg on site? [3745-52-34(D)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: 6,000 kg = approximately 27, 55-gallon drums. If the facility is accumulating waste for greater than 180/270 days without an extension/permit or is accumulating greater than 6,000 kg on-site, it is classified as a storage facility and TSD standards apply. Complete applicable TSD checklists.

8.	Does the generator treat hazardous waste in a:	
a.	Container that meets 3745-66-70 to 3745-66-77?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Tank that meets 3745-66-101?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
c.	Drip pads that meet 3745-69-40 to 3745-69-45?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
d.	Containment building that meets 3745-256-100 to 3745-256-102?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

NOTE: Complete appropriate checklist for each unit.

NOTE: If waste is treated to meet LDRs, use LDR checklist.

MANIFEST REQUIREMENTS

9.	Are all hazardous wastes either reclaimed under a contractual agreement as defined in OAC rule 3745-52-20(E), or shipped off-site accompanied by a manifest (U.S. EPA Form 8700-22)? [3745-52-20(A)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
10.	Are wastes reclaimed under a contractual agreement? If so: [3745-52-0(E)]	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
a.	Does the contractual agreement specify the type of waste and frequency of shipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Is the transport vehicle owned and operated by the reclaimer?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

	c. Is a copy of the reclamation agreement kept on-site for at least three years after termination/expiration of the agreement?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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NOTE: If wastes are reclaimed under a contractual agreement and an answer to questions 10(a) through 10(c) is no, the generator is in violation of 3745-52-20 (A) (B) & (D), 3745-52-22 and 3745-52-23. Even if the waste is being reclaimed under agreement, LDRs still apply. Complete LDR checklist.

11.	Have items 1 through 20 of each manifest been completed? [3745-52-20(A)(1)] & [3745-52-27(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: U.S. EPA Form 8700-22(A) (the continuation form) may be needed in addition to Form 8700-22. In these situations, items (21) through (35) must also be complete. [3745-52-20(A)(1)]

12.	Does each manifest designate at least one facility which is permitted to handle the waste? [3745-52-20(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: The generator may designate on the manifest one alternative facility to handle the waste in the event of an emergency which prevents the delivery of waste to the primary designated facility. [3745-52-20(C)]

13.	If the transporter was unable to deliver a shipment of hazardous waste to the designated facility did the generator designate an alternative TSD facility or give the transporter instructions to return the waste? [3745-52-20(D)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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14.	Have the manifests been signed by the generator and initial transporter? [3745-52-23 (A) (1) and (2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: Remind the generator that the certification statement they signed indicates: 1) they have properly prepared the shipment for transportation and 2) they have made a good faith effort to minimize their waste generation.

15.	If the generator received a rejected load or residue, did the generator:	
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	a. Sign item 20 of the new manifest or item 18c of the original manifest? [3745-52-23(F)(1)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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	b. Provide the transporter a copy of the manifest? [3745-52-23(F)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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	c. Send a copy of the manifest to the designated facility that returned the shipment with 30 days after delivery of the rejected shipment? [3745-52-23(F)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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16.	If the generator did not receive a return copy of each completed manifest within 60 days of being accepted by the transporter did the generator submit to Ohio EPA, a copy of the manifest with some indication that the generator has not received confirmation of delivery? [3745-52-42(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
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17.	Are signed copies of all manifests being retained for at least three years? [3745-52-40]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: A generator who sends a shipment of hazardous waste to a TSD facility with the understanding that the TSD facility can accept and manage the waste and later receives that shipment back as a rejected load or residue may accumulate the waste on-site for <90 days or <180 days depending on the amount of hazardous waste on-site in that calendar month. [3745-52-34(M)]

NOTE: Waste generated at one location and transported along a publicly accessible road for temporary consolidated storage or treatment on a contiguous property also owned by the same person is not considered "on-site" and manifesting and transporter requirements must be met. To transport "along" a public right-of-way the destination facility has to act as a transfer facility or have a permit because this is considered to be "off-site." For additional information see the definition of "on-site" in OAC rule 3745-50-10.

PREPAREDNESS AND PREVENTION

18.	Is an emergency coordinator available at all times (on-site or on-call)? [3745-52-34(D)(5)(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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19.	Has the following been posted by the telephone: [3745-52-34(D)(5)(b)]	
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	a. Name and telephone number of emergency coordinator?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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	b. Location of fire and spill control equipment, and, if present, fire alarm(s)?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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	c. Telephone number of local fire department?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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20.	Are employees familiar with waste handling and emergency procedures? [3745-52-34(D)(5)(c)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
21.	Has the facility properly responded to all fires and spills? [3745-52-34(D)(5)(d)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
22.	Is the facility operated to minimize the possibility of fire, explosion, or any unplanned sudden or nonsudden release of hazardous waste? [3745-65-31]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
23.	Does the generator have the following equipment at the facility if it is required due to actual hazards associated with the waste:	
a.	Internal Alarm system? [3745-65-32(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Emergency communication device? [3745-65-32(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Portable fire control, spill control and decon equipment? [3745-65-32(C)]?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Water of adequate volume/pressure per documentation or facility rep? [3745-65-32(D)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
24.	Is emergency equipment tested (inspected) as necessary to ensure its proper operation in time of emergency? [3745-65-33]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Are inspections recorded in a log or summary? [3745-65-33]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
25.	Do personnel have immediate access to an internal alarm or emergency communication device when handling hazardous waste (<i>unless the device is not required under OAC 3745-65-32</i>)? [3745-65-34(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
26.	If there is only one employee on the premises is there immediate access to a device (ex. phone, hand-held two-way radio) capable of summoning external emergency assistance (<i>unless not required under OAC 3745-65-32</i>)? [3745-65-34(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
27.	Is adequate aisle space provided for unobstructed movement of emergency or spill control equipment? [3745-65-35]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
28.	Has the generator attempted to familiarize emergency authorities with possible hazards and facility layout? [3745-65-37(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
29.	Where authorities have declined to enter into arrangements or agreements, has the generator documented such a refusal? [3745-65-37(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
SATELLITE ACCUMULATION AREA REQUIREMENTS		
30.	Does the generator ensure that satellite accumulation area(s):	
a.	Are at or near a point of generation? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
b.	Are under the control of the operator of the process generating the waste? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
c.	Do not exceed a total of 55 gallons of hazardous waste per waste stream? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
d.	Do not exceed one quart of acutely hazardous waste at any one time? [3745-52-34(C)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
e.	Containers are closed, in good condition and compatible with wastes stored in them? [3745-52-34(C)(1)(a)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
f.	Containers are marked with the words "Hazardous Waste" or other words identifying the contents? [3745-52-34(C)(1)(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
31.	Is the generator accumulating hazardous waste(s) in excess of the amounts listed in the preceding question? If so:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
a.	Did the generator comply with 3745-52-34(A)(1) through (4) or other applicable generator requirements within three days? [3745-52-34(C)(2)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
b.	Did the generator mark the container(s) holding the excess with the	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

	accumulation date when the 55 gallon (one quart) limit was exceeded? [3745-52-34(C)(2)]	
<p><i>NOTE: The satellite accumulation area is limited to 55 gallons of hazardous waste accumulated from a distinct point of generation in the process under the control of the operator of the process generating the waste (less than 1 quart for acute hazardous waste). There could be individual waste streams accumulated in an area from different points of generation.</i></p>		
USE AND MANAGEMENT OF CONTAINERS		
32.	Has the generator marked containers with the words "Hazardous Waste?" [3745-52-34(D)(4)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
33.	Is the accumulation date on each container? [3745-52-34(D)(4)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
34.	Are hazardous wastes stored in containers which are:	
	a. Closed (except when adding/removing wastes)? [3745-66-73(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b. In good condition? [3745-66-71] The plastic lid of one container was cracked.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
	c. Compatible with wastes stored in them? [3745-66-72]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d. Handled in a manner which prevents rupture/leakage? [3745-66-73(B)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<p><i>NOTE: Record location on process summary sheets and photograph the area.</i></p>		
35.	Is the container accumulation area(s) inspected at least once during the period from Sunday to Saturday? [3745-66-74]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	a. Are inspections recorded in a log or summary? [3745-66-74]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
36.	Are containers of incompatible wastes stored separately from each other by means of a dike, berm, wall or other device? [3745-66-77(C)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
37.	If the generator places incompatible wastes, or incompatible wastes and materials in the same container, is it done in accordance with 3745-65-17(B)? [3745-66-77(A)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
38.	If the generator places hazardous waste in an unwashed container that previously held an incompatible waste, is it done in accordance with 3745-65-17(B)? [3745-66-77(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<p><i>NOTE: OAC 3745-65-17(B) requires that the generator treat, store, or dispose of ignitable or reactive waste, and the mixture or commingling of incompatible wastes, or incompatible wastes and materials so that it does not create undesirable conditions or threaten human health or the environment.</i></p>		
PRE-TRANSPORT REQUIREMENTS		
39.	Does each generator package/label its hazardous waste in accordance with the applicable DOT regulations? [3745-52-30, 3745-52-31 and 3745-52-32(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
40.	Does each container ≤119 gallons have a completed hazardous waste label? [3745-52-32(B)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
41.	Before off-site transportation, does the generator placard <u>or</u> offer the appropriate DOT placards to the initial transporter? [3745-52-33]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
<p><i>NOTE: Continue with the generator LDR requirements on the next page.</i></p>		

GENERATOR LDR REQUIREMENTS

NOTE: This LDR checklist does not include the requirements for generators that treat to meet LDR standards. If the generator treats, the inspector should use the stand-alone Generator LDR checklist instead of this checklist.

GENERAL REQUIREMENTS

1.	If LDRs do not apply, does the generator have a statement that lists how the HW was generated, why LDRs don't apply and where the HW went? [3745-270-07(A)(7)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
2.	Did the generator determine if the HW/soil must be treated to meet the LDR treatment standard prior to disposal? Generator knowledge or testing may be used. [3745-270-07(A)(1)] If not,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Did the generator send the waste to a permitted HW TREATMENT facility? [3745-270-07(A)(1)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

NOTE: This is done by determining if the HW/soil contains levels of constituents greater than the levels given in its LDR treatment standard in 3745-270-40. However, if a specific treatment method is given in 3745-270-40 for the HW, no determination is required [3745-270-07(A)(1)(b)]. If soil, generator can choose to have soil treated to LDR levels given in 3745-270-49 (alternative treatment levels for soils).

3.	Does the generator have documentation of how he determined whether the HW/soil meets or does not meet the LDR treatment standard in 2, above? [3745-270-07(A)(6)(a) or 3745-270-07(A)(6)(b)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.	Does the generator keep the documentation required in #2, above, on-site for at least three years from the last date the HW/soil was sent on-site/off-site for treatment/disposal? [3745-270-07(A)(8)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
5.	Does the generator generate a listed HW that exhibits a characteristic? If yes,	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	Did the generator determine if the listed HW exhibits a characteristic that is not treated under the LDR treatment standard for the listed HW? [3745-270-09(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

FOR EXAMPLE: F006 that exhibits the characteristic for silver or K062 that is corrosive, D002. Review LDR treatment standard in 3745-270-40 to determine what constituents the listed HW is treated for.

6.	Did the generator determine if its characteristic HW contains underlying hazardous constituents that need to be treated? [3745-270-09(A)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: This is done by evaluating which underlying hazardous constituents (UHC) are in the HW at levels above the universal treatment standards given in 3745-270-48. This requirement does not apply to high total organic carbon (i.e., contains >10% TOC) D001 wastes or listed HWs.

NOTE: Written documentation of this determination is not required.

7.	Did the generator treat his HW /soil on-site <u>to meet</u> the LDR treatment standard?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
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NOTE: If "Yes" see question #16.

8.	Did the generator send a one-time LDR notification form to the TSD with the first shipment to that facility? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
a.	If the generator chose not to make the determination of whether his waste must be treated, did he send a notice to the TSD facility with each shipment? [3745-270-07(A)(2)] If so, did the notice include:	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
i.	Applicable HW codes?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
ii.	Manifest number of the first shipment to the TSD?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
iii.	A statement that conveys that the HW may or may not be subject to the LDR treatment standards and the TSD must make that determination.?"	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
9.	Did the generator resubmit the LDR notification form to the TSD when the HW changed or the generator used a new TSD? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
10.	Does the generator have a copy of the LDR notification form/notice on file? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

	a.	Is the form/notice kept on file for three years after last HW shipped? [3745-270-07(A)(8)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTIFICATION FORM			
11.	Does the LDR Notification form contain the following information:		
	a.	Manifest number of the first waste shipment to the TSD? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	b.	Applicable waste codes (includes characteristic codes for a listed HW if applicable)? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	c.	A statement that conveys that the HW is subject to LDRs and must be treated to meet LDR treatment requirements? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
	d.	A designation whether the HW is a wastewater or non-wastewater? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: A wastewater contains <1% by wt. total suspended solids (TSS) and <1% by wt. TOC. If you doubt the HW is a wastewater or non-wastewater, the HW can be tested using for example, Standard Methods (SM) 160.2 for TSS, SW-846 method 9060a for TOC.			
	e.	Designation of the waste subcategory when applicable? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: Subcategories are found on the LDR treatment standards table under the applicable waste code. Not all HWs have subcategories			
	f.	A listing of the underlying hazardous constituents for which a characteristic waste must be treated? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: Not required if the waste is high TOC D001 or the TSD tests its treatment residues for all underlying hazardous constituents.			
	g.	If the HW is F001-F005 or F039, did the generator note on the LDR form what solvents or constituents, respectively, the waste contains and must be treated for? [3745-270-07(A)(2)]	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
NOTE: Not required if the TSD tests its treatment residues for all underlying hazardous constituents.			
PROHIBITED DILUTION			
12.	Is the HW treated by burning? If "No" go to #15.		Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
13.	Is the HW a metal-bearing HW?		Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
NOTE: Generally, metal-bearing HWs contain heavy metals above TCLP levels or were listed due to the presence of metals. A list of the restricted metal-bearing HWs is given in the Appendix to 3745-270-03.			
14.	a.	Metal-bearing HWs cannot be incinerated, combusted or, blended and burned for fuel unless <u>one</u> of the following conditions apply. [3745-270-03(c)]	
	i.	Contains > 1% TOC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	ii.	Contains organic constituents or cyanide at levels greater than the UTS levels?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	iii.	Is made up of combustible material e.g., paper, wood, plastic?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	iv.	Has a reasonable heating value (e.g., > 5000 Btu)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	v.	Co-generated with a HW that must be combusted?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	b.	If all responses to 14 a.i. through 14 a.v. are "No", HW is being improperly treated by dilution, violation of 3745-270-03(C). Is HW being treated by dilution?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
15.	Was the HW treated by wastewater treatment?		Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

	a. Is a LDR treatment method, other than DEACT or a numerical value, specified for the waste? [3745-270-03(B) and 3745-270-40(A)(3)]	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<i>NOTE: If "Yes", HW is improperly being treated by dilution.</i>		
	b. Does the waste carry the D001 code <u>and</u> contain $\geq 10\%$ TOC?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
	c. Does the wastewater treatment process include a process to separate/recover the organic phase of the waste?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
<i>NOTE: If the answers to b & c are "yes" and "no", respectively, waste is improperly being treated by dilution and generator is in violation of [3745-270-03(B)] and 3745-270-40(A)(3)].</i>		
<i>NOTE: A list of separation/recovery processes are given in 3745-270-42 under RORG.</i>		